



# House of Representatives

## File No. 896

General Assembly

January Session, 2011

**(Reprint of File No. 269)**

House Bill No. 5634  
As Amended by House Amendment  
Schedule "A"

Approved by the Legislative Commissioner  
June 3, 2011

**AN ACT CONCERNING EXPEDITED LICENSING PROCESSES FOR  
PREVIOUSLY LICENSED OPERATORS OF CHILD DAY CARE  
CENTERS AND GROUP DAY CARE HOMES AND THE  
ESTABLISHMENT OF A PILOT PROGRAM THAT PROVIDES  
TEMPORARY CARE TO CHILDREN WITH ILLNESSES.**

Be it enacted by the Senate and House of Representatives in General  
Assembly convened:

1 Section 1. Section 19a-80 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective October 1, 2011*):

3 (a) No person, group of persons, association, organization,  
4 corporation, institution or agency, public or private, shall maintain a  
5 child day care center or group day care home without a license issued  
6 in accordance with sections 19a-77 to 19a-80, inclusive, and 19a-82 to  
7 [19a-87] 19a-87a, inclusive. Applications for such license shall be made  
8 to the Commissioner of Public Health on forms provided by the  
9 commissioner and shall contain the information required by  
10 regulations adopted under said sections. The forms shall contain a  
11 notice that false statements made therein are punishable in accordance  
12 with section 53a-157b.

13 (b) (1) Upon receipt of an application for a license, the  
14 Commissioner of Public Health shall issue such license if, upon  
15 inspection and investigation, said commissioner finds that the  
16 applicant, the facilities and the program meet the health, educational  
17 and social needs of children likely to attend the child day care center or  
18 group day care home and comply with requirements established by  
19 regulations adopted under sections 19a-77 to 19a-80, inclusive, and  
20 sections 19a-82 to [19a-87] 19a-87a, inclusive. The [Commissioner of  
21 Public Health] commissioner shall offer an expedited application  
22 review process for an application submitted by a municipal agency or  
23 department. [Each license shall be for a term of two years, provided on  
24 and after October 1, 2008, each] The commissioner shall have  
25 discretion to determine whether a change of operator, ownership or  
26 location request from a currently licensed person or entity, as  
27 described in subsection (a) of this section, shall require the filing of a  
28 new license application from such person or entity. Each license shall  
29 be for a term of four years, shall be nontransferable, may be renewed  
30 upon payment of the licensure fee and may be suspended or revoked  
31 after notice and an opportunity for a hearing as provided in section  
32 19a-84 for violation of the regulations adopted under sections 19a-77 to  
33 19a-80, inclusive, and sections 19a-82 to [19a-87] 19a-87a, inclusive.

34 [(2) Prior to October 1, 2008, the Commissioner of Public Health  
35 shall collect from the licensee of a day care center a fee of two hundred  
36 dollars for each license issued or renewed for a term of two years. Prior  
37 to October 1, 2008, said commissioner shall collect from the licensee of  
38 a group day care home a fee of one hundred dollars for each license  
39 issued or renewed for a term of two years.]

40 [(3)] (2) [On and after October 1, 2008, the] The Commissioner of  
41 Public Health shall collect from the licensee of a day care center a fee of  
42 five hundred dollars for each license issued or renewed for a term of  
43 four years. [On and after October 1, 2008, said] The commissioner shall  
44 collect from the licensee of a group day care home a fee of two  
45 hundred fifty dollars for each license issued or renewed for a term of  
46 four years. The [Commissioner of Public Health] commissioner shall

47 require only one license for a child day care center operated in two or  
48 more buildings, provided the same licensee provides child day care  
49 services in each building and the buildings are joined together by a  
50 contiguous playground that is part of the licensed space.

51 (c) The Commissioner of Public Health, within available  
52 appropriations, shall require each prospective employee of a child day  
53 care center or group day care home in a position requiring the  
54 provision of care to a child to submit to state and national criminal  
55 history records checks. The criminal history records checks required  
56 pursuant to this subsection shall be conducted in accordance with  
57 section 29-17a. The commissioner shall also request a check of the state  
58 child abuse registry established pursuant to section 17a-101k. Pursuant  
59 to the interagency agreement provided for in section 10-16s, the  
60 Department of Social Services may agree to transfer funds  
61 appropriated for criminal history records checks to the Department of  
62 Public Health. The commissioner shall notify each licensee of the  
63 provisions of this subsection.

64 (d) The commissioner shall inform each licensee, by way of a plain  
65 language summary provided not later than sixty days after the  
66 regulation's effective date, of new or changed regulations adopted  
67 under sections 19a-77 to 19a-80, inclusive, or sections 19a-82 to [19a-87]  
68 19a-87a, inclusive, with which a licensee must comply.

69 Sec. 2. (*Effective October 1, 2011*) (a) The Department of Public Health  
70 shall permit the establishment of a drop-in pilot program to provide  
71 facility-based temporary custodial care for any child fifteen years of  
72 age or younger with a communicable or noncommunicable illness. The  
73 pilot program shall be administered by a physician licensed in  
74 accordance with the provisions of chapter 370 of the general statutes.  
75 The pilot program may provide temporary custodial care for not more  
76 than twelve children per day. A child participating in the pilot  
77 program may not receive more than nine hours of custodial care per  
78 day.

79 (b) Prior to implementation of the pilot program, the physician  
 80 administering such program shall submit to the Department of Public  
 81 Health for review and approval: (1) A physical plant description of the  
 82 building, including, but not limited to, a description of the interior  
 83 space, that will be used to operate the pilot program; and (2) proposed  
 84 policies and procedures concerning the operation and administration  
 85 of such program. Policies and procedures shall address subjects that  
 86 include, but are not limited to, daily operations, staffing qualifications  
 87 and levels, criteria for the assessment of children prior to admittance  
 88 and during operating hours, documentation and record-keeping,  
 89 infection control measures, medication administration and emergency  
 90 response procedures.

91 (c) The program administrator shall submit the required  
 92 documentation for each prospective employee to the Commissioner of  
 93 Public Health, who shall request a check of each prospective  
 94 employee's name from the state child abuse registry established  
 95 pursuant to section 17a-101k of the general statutes.

96 (d) The program administrator shall allow any employee of the  
 97 Department of Public Health immediate access to the facility, its staff  
 98 and records at any time during customary business hours. The  
 99 program administrator shall submit quarterly status reports to the  
 100 department in a form and manner prescribed by the department. The  
 101 program shall terminate on September 30, 2013.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2011	19a-80
Sec. 2	October 1, 2011	New section

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

## **OFA Fiscal Note**

### **State Impact:**

Agency Affected	Fund-Effect	FY 12 \$	FY 13 \$
Public Health, Dept.	GF - Potential Revenue Loss	0 - 750	0 - 750

Note: GF=General Fund

### **Municipal Impact:** None

### **Explanation**

The bill results in a potential General Fund revenue loss of up to \$750 annually. It gives the Public Health Commissioner discretion to exempt child day care center and group day care home licensees from filing a new license application when changing operator, ownership, or location. It is anticipated that the Commissioner will exempt no more than one child day care center (\$500) and one group day care home (\$250) <sup>1</sup> from this requirement each year. The bill also allows for the establishment of a drop-in pilot program to provide facility-based temporary custodial care for any child 15 years-of-age or younger with a communicable, or noncommunicable illness. This provision does not result in a fiscal impact to either the Department of Public Health (DPH), or to the Department of Children and Families' (DCF).

House "A" (1) allows for the establishment of a pilot program, (2) requires the program administrator to submit names of prospective employees to DPH for a records check of DCF's child abuse registry, and (3) requires the program to terminate on 9/30/13. House "A"

<sup>1</sup> The fee for a new child day care center license is \$500 and the fee for a new group day care home license is \$250. Under current law, licenses are issued for a term of four years with certain exemptions, including change in operator, ownership, or location, and suspension/revocation due to violation of regulations.

does not result in a fiscal impact to either DPH, or DCF.

***The Out Years***

The ongoing fiscal impact identified above would continue into the future subject to the number of child day care centers and group day care home licenses exempted from filing a new license application for a change in operator, ownership, or location.

---

**OLR Bill Analysis****HB 5634 (as amended by House "A")\******AN ACT CONCERNING EXPEDITED LICENSING PROCESSES FOR PREVIOUSLY LICENSED OPERATORS OF CHILD DAY CARE CENTERS AND GROUP DAY CARE HOMES.*****SUMMARY:**

By law, no person, group, association, organization, corporation, institution, or agency, public or private, can operate a child day care center or group day care home without a license from the Department of Public Health (DPH). This bill gives the DPH commissioner discretion to determine whether a request for a change of operator, ownership, or location from a currently licensed day care provider requires filing a new license application. Currently, such a change requires a new initial application (Conn. Agency Regs. § 19a-79-3a).

The bill also allows for the establishment of a drop-in pilot program to provide temporary custodial care to sick children.

\*House Amendment "A" adds the drop-in pilot program provision.

EFFECTIVE DATE: October 1, 2011

**DROP-IN PILOT PROGRAM**

The bill directs DPH to allow the establishment of a drop-in pilot program to provide facility-based temporary custodial care for any child fifteen years of age or younger with a communicable or noncommunicable illness. The pilot program (1) must be administered by a licensed physician and (2) may provide temporary custodial care for not more than twelve children per day. A child in the program may not receive more than nine hours of custodial care per day.

Before implementing the pilot program, the administering physician must provide to DPH for review and approval: (1) a physical plant description of the building, including a description of the interior space, that will be used to house the pilot program; and (2) proposed policies and procedures for operating and administering the program. The latter must address daily operations, staffing qualifications and levels, criteria for the assessment of children before admittance and during operating hours, documentation and record-keeping, infection control measures, medication administration, and emergency response procedures.

The program administrator must (1) submit the required documentation for each prospective employee to the DPH commissioner, who must request a check of each prospective employee's name from the state child abuse registry; (2) allow any DPH employee immediate access to the facility, its staff, and records at any time during customary business hours and (3) submit quarterly status reports to the department in a form and manner it prescribes.

The pilot program terminates on September 30, 2013.

## **BACKGROUND**

### ***Day Care Licensing***

An application for an initial or renewal license must be on DPH-prescribed forms. An initial license application must be signed by the operator, who must be at least 20 years of age if an individual. If the operator is a group of persons, organization, corporation, or other entity, it must be signed by the legal representative of the day care operator. The application must contain the following:

1. a notarized original affidavit on a DPH form;
2. the name of the child day care center or the group day care home and address and telephone number;
3. the name, home address, and home telephone number of the individual operator or the legal representative of a group of



persons, association, organization, corporation, institution or agency, public or private;

4. a copy of the current fire marshal certificate of approval, written verification of compliance with state and local building codes, local zoning requirements, and local health ordinances;
5. proposed licensed capacity;
6. ages of children to be served;
7. days, hours, and months of program operation;
8. criminal background checks and a check of the State Child Abuse Registry as required by state regulation; and
9. all other documentation that the DPH commissioner deems necessary to establish that the licensee will meet the health, educational, and social needs of the children likely to attend the center or home (Conn. Agency Regs., §§ 19a-79-4a(b) and 19a-79-2a).

### COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 26      Nay 0      (03/14/2011)